



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 7510

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/782,902	02/23/2004	705	3626	03191.000100.
<b>RULE</b>				
<b>APPLICANTS</b> Max Stanford Tomlinson JR., Thousand Oaks, CA; Tsuneo Imai, Irvine, CA; Stanley D. Shapiro, Los Angeles, CA; Richard Bennett, San Rafael, CA; C. Mike Tomlinson, Thousand Oaks, CA; Alexander Joffe, Thousand Oaks, CA;				
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/13/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /DILEK B COBANOGU/	<input type="checkbox"/> Met after Allowance DBC Initials	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>
Acknowledged	Examiner's Signature	CA	8	12
<b>INDEPENDENT CLAIMS</b>				
1				
<b>ADDRESS</b> FITZPATRICK CELLA HARPER & SCINTO 1290 Avenue of the Americas NEW YORK, NY 10104-3800 UNITED STATES				
<b>TITLE</b> Method for payer access to medical image data				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees		
		<input type="checkbox"/> 1.16 Fees (Filing)		
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		
		<input type="checkbox"/> 1.18 Fees (Issue)		
		<input type="checkbox"/> Other _____		
		<input type="checkbox"/> Credit		